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Medical Examinations By Last Name

Civil War

10-17-1861

Pearson, Frank

Adjutant General

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FORM FOR EXAMINING A RECRUIT.

NAME ^{Pearson} *Frank Pearson*, age *18 years*, occupation *Farmer*, born in *Sedgwick* *P. & White*

1. Have you any disease of Brain, or imperfection in eye-sight, or hearing? *no*
2. Have you any disease of throat, or difficulty of utterance? *no*
3. Have you any disease of Lungs or Heart? *no*
4. Have you any disease of Stomach, Liver, Bowels, or Urinary Organs? *no*
5. Have you any Bone, Joint, or Muscle incapacitated by any cause, from performing its natural office? *no*
6. Have you been vaccinated within seven years? *no*

REMARKS.

DATE:

Oct 17, 1861

RENDEZVOUS:

Bay of Maine

Amson

Examining Surgeon.